9 FAM 40.51 Exhibit III Application for Alien Employment Certification

U.S. DEPARTMENT OF LABOR Employment and Training Administration OMB Approval No. 44-R1301

IMPORTANT: READ CAREFULLY BEFORE COMPLETING THIS FORM. PRINT legibly in link or use a typewriter. If you need space to answer questions on this form, use a separate sheet, identify each answer with the number of the corresponding question. SIGN AND DATE each sheet in original signature.

APPLICATION FOR ALIEN EMPLOYMENT CERTIFICATION					each sheet in original signature. To knowingly furnish any false information in the preparation of this form and any supplement thereto or to aid, abet, or counsel another to do so is a felony punishable by \$10,000 fine or 5 years in the penitentiary, or both (18 U.S.C. 1001).							
I. Name of Al	en (Family r	name in c	apital	letter, First, Mide	die, Maiden)					•		
2. Present Add	iress of Aller	n (Numbe	r, Str	eet, City and Tow	n, State ZIP C	ode or Provinc	e, Countr	y)	3. Type of Vis U.S.)	a (If in		
				SUBMITTED AS E	VIDENCE OF A	N OFFER OF	EMPLOY	MENT.				
4. Name of Employer (Full name of organization)								5. Telephone (Area Code and Number)				
				n, Country, State,								
7. Address W	nere Allen W	/III WORK		erent from item 6		Des Moek	- 1 44	Work	12. Rate	of Pay		
8. Nature of E Activity	8. Nature of Employer's Business Activity		9. Name of Job Title		10. Total Hou a. Basis	b. Overtime	Sch	nedule ourly) a.m.	a. Basic	b. Overtime		
					,	1	p.m.	per	per hour			
for a worker to tem 13 above EDUCATION	Grade High	atisfactori	ly the	on, training, and on job duties describ	bed in	15. Other Sp	pecial Red	quireme	ents			
(Enter num- ber of	School S	hool		(Specify)		1						
years)	ľ			Major Field of Study		_						
TRAINING	No. Yrs.	No. Mo		Type of Training								
EXPERI-	Job Offered Related Occupation			Related Occupation (specify)		1						
ENCE	Yrs Mos	imber Yrs	Mos					T				
16. Occupati Person Who Immediate S	Will Be Alie	n's →	>					Alien	Number of Emp Will Supervise	•		
	-					◆ Endo gove	rsements	(Make se only.	no entry in se	ction for		
						•			te Forms Recei	ved		
							L.O		s.o			
							R.O.		N.O.			
							Ind. Co		Occ. Coc	10		
							Occ. Ti	tle				
Replaces MA	7-50A, B a	nd C (Ap	r. 197	70 edition) which i	s obsolete				ETA 7	50 (Oct. 1979		

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18. Complete items only if job is temporary						19. If job is unionized (Complete)								
				1										
Filled By Aliens Under		to be '	b. Exact Dates You Expect To Employ Allen			umbe of		b. Na	Name of Local					
		From	То	ן י	.ocai		- CI	y and State						
	· [-		- 1					0. 011	c. City and State					
•		ĺ		1										
20 States			lab Offers (Complete for	26,000 6									
	ption of Re			ersons Residi										
("X" one) Number of Rooms House Apartment		Adults			Children				oard and private					
		Ì	Boys					room not s	hared with	("X"	'X" one)			
				\vdash					Yes 🗆					No
			Giris											
21. Desc	ribe efforts	to recruit L	I.S. workers	and the result	s. (Spe	cify :	Sources	of Recru	itment by Nam	θ)			••	
i														
22. Appliing de	cants requ ocumentat	ire various t ion is includ	ypes of docur and with your a	nentation. Ple	ase rea	d PA	RT II of 1	the instr	uctions to assu	re that app	ropriate	suppo	ort	
				23. EMPLO	OYER CE	RTIF	FICATION	18						
	Ву	virture of n	ny signature b	elow, I HERE	BY CER	TIFY	the follo	wing cor	nditions of empi	loyment.				
a.	have enou	igh funds av	ailable to pay	the wage	●.	The	e job opp	ortunity	does not involv	e unlawful	discrim	ination	1	
,	or salary o	ffered the al	ien.			har	race, cre ndicap, c	r citizen	or, national orig ship.	jin, age, se	x, relig	ion,		
b. ;	The wage	offered equa	is or exceeds	the pre-	f.	The	e job opp	ortunity	is not:					
vailing wage and I guarantee that, if a labor certification is granted, the wage paid to the						(1	(1) Vacant because the former occupant is on strike or is							
allen when the allen begins work will equal or exceed the prevailing wage which is applicable at the time the allen begins work.						being locked out in the course of a labor dispute involvir a work stoppage.						olving		
	applicable	at the time	the alien begi	ns work.		(2			labor dispute	involving a	work st	oppag	в.	
			t based on co											
	tee a wage	paid on a v	ntives, uniess veekly, bi-wa	rguaran- ekiy or	g.	The	e job opp	ortunity	's terms, condi contrary to Fe	tions and o	ccupati	onal	,	
	monthly ba	sis.	-			0	, or in recti	. 210 110	Contrary to 1 c	dorui, otat	0 01 100	, , , u ,	•	
d. I will be able to place the alien on the payroll on or before the date of the alien's proposed					h.	. The job opportunity has been and is clearly open to any qualified U.S. worker.								
	on or petor entrance in	re the date on to the Unite	of the allen's ad States.	proposed		any	any quantieu U.S. WUREI.							
				24. DECL	ARATIO	NS	······							
DECLAR														
OF EMPLO		→ F	Pursuant to 28	U.S.C. 1746	i declar	e un	der pena	ity of pe	rjury the forego	ing is true	and cor	rect.		
										T .				******
Signature	0									Date				
Name (7	Type or prin	of)				-	Title							
.,	,,pc c. p	,												
												t/o		
Authoriza Agent of	ation of Employer	→	I HEREBY L	JESIGNATE tI L RESPONSIE	ne agent BILITY for	DOIO	uracy of	any rep	ne for the purpo resentations ma	ses of labor ide by my a	gent.	attion	ana	
Signatur	e of Emplo	yer								Date				
]	•													
<u> </u>		Oul-41				_	Address	e of Acc	ent (Number, S	treet City	State	ZIP C	ode)	
Name of	Agent (T)	pe or Print)				,	Audi 63	o or Age	(140/1100), 3	30t, Ony,	J.410,	0	J	
						•								

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ITEMIZED INSTRUCTIONS FOR COMPLETING FORM ETA 750

PART A. OFFER OF EMPLOYMENT (To be completed by Employer)

ITEM 1. NAME OF ALIEN. Enter full name exactly as it appears on Part B, "Statement of Qualifications of Alien."

ITEM 2. PRESENT ADDRESS OF ALIEN. Enter whether in the United States or abroad.

ITEM 3. TYPE OF VISA. If the alien is in the United States, enter the type of visa held, i.e., B-2 (visitor), F-1 (Student), or current status as shown on INS Form I-94.

ITEM 4. NAME OF EMPLOYER. Enter full name of business, firm, or organization, or if an individual, enter name used for legal purposes on documents.

ITEM 5. TELEPHONE NUMBER. In job offers for private households, enter a business and home telephone number where all adults are employed.

ITEM 6. ADDRESS OF EMPLOYER. Self-explanatory.

ITEM 7. ADDRESS WHERE ALIEN WILL WORK. Enter the full address of site or location where the work will actually be performed, if different from the address in Item 6.

ITEM 8. NATURE OF EMPLOYER'S BUSINESS. Enter a brief, non-technical description, i.e., retail store, household, university, financial institution.

ITEM 9. NAME OF JOB TITLE. Enter the common name or payroll title of the job being offered.

ITEM 10. TOTAL HOURS PER WEEK. Enter the basic hours of work required per week and overtime hours per week in accordance with State or Federal law for the work and locality.

ITEM 11. WORK SCHEDULE. Show the daily work schedule for the job, i.e., 9 a.m. to 5 p.m., 7 a.m. to 11 a.m. and 4 p.m. to 8 p.m.

ITEM 12. RATE OF PAY. Enter a guaranteed wage and the unit of pay, such as \$5.00 per hour, \$850 per month, or \$12,000 per year. Wage offered cannot be based on commission, bonuses, or other incentives, unless the employer guarantees a wage paid on a weekly, bi-weekly, or monthly basis.

ITEM 13. JOB DUTIES. Describe the job duties, in detail, that would be performed by any worker filling the job. Specify equipment used and pertinent working conditions.

ITEM 14. MINIMUM EDUCATION, TRAINING, AND EXPERIENCE REQUIRED TO PERFORM THE JOB DUTIES. Do not duplicate the time requirements. For example, time required in training should not also be listed in education or experience, indicate whether months or years are required. Do not include restrictive requirements which are not actual business necessities for performance of the job and which would limit consideration of otherwise qualified U.S. workers.

ITEM 15. OTHER SPECIAL REQUIREMENTS. Enter the job related requirements. Examples are short-hand and typing speeds, specific foreign language proficiency, test results. Document business necessity for a foreign language requirement.

ITEM 16. OCCUPATIONAL TITLE OF PERSON WHO WILL SUPERVISE ALIEN. Self-explanatory.

ITEM 17. NUMBER OF EMPLOYEES ALIEN WILL SUPERVISE. Self-explanatory.

ITEM 18. COMPLETE ONLY IF JOB IS TEMPORARY. Does not apply for offers of permanent employment.

ITEM 19. IF THE JOB IS UNIONIZED. Enter the number of the local, the name of the union, and the City and State in which the local has its main office.

ITEM 20. STATEMENT OF LIVE-AT-WORK JOB OFFERS IN PRIVATE HOUSEHOLDS. (Do not complete for other job

ITEM 20(a). DESCRIPTION OF RESIDENCE. Self-explanatory.

ITEM 20(b). NUMBER OF PERSONS RESIDING AT PLACE OF EMPLOYMENT. Enter the number of adults, children under 18 years old, their sex and specific ages of children.

ITEM 21. RECRUITMENT EFFORTS. Describe in detail efforts to recruit U.S. workers for the job opportunity and the results. List sources of recruitment by name, i.e., Lane Technical School, the Daily Tribune Newspaper, Scientific Journal of America. Specify the number of applicants interviewed from each source and the lawful job-related reasons why they were not hired.

ITEM 22. READ THE GENERAL INSTRUCTIONS FOR ADDITIONAL SUPPORTING DOCUMENTATION WHICH MUST BE SUBMITTED, IN SEPARATE ATTACHMENTS, ALONG WITH THIS APPLICATION. General instructions will provide information that may be required. Documentation for Schedule A may be found in Part II. Department of Labor regulations require that an employer submit documentation to clearly show that the job offer and the recruitment of U.S. workers are in compliance with regulations. In addition, special documentation is required for certain occupational groups.

ITEM 23. EMPLOYER CERTIFICATION. Read carefully. The employer certifies to these eight (8) conditions of employment by signing the form.

ITEM 24. EMPLOYER DECLARATION. All copies of this form must bear the original signature of the employer or the employer's duly authorized representative with hiring authority. False statements are subject to Federal perjury and fraud penalties. The authorization of agent is completed only when the employer designates an agent to represent the employer in applying for labor certification. It is recommended that the employer not sign a blank form, since the employer takes full responsibility for any representations of its agents.